IN JUNE 10			Application No.	09/600,546	BECEIVED
TRANSMITTAL FORM (to be used for all correspondence after initial filing)  Total Number of Pages in This Submission 6			Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	July 12, 2000 Claude Chappert 1756 Angebranndt, M.J 15675P322	FEB <b>2 4</b> 2004
	ENCLOS	SURES (chec	k all that apply)		
Fee Transmittal Form  Fee Attached  Amendment / Response  After Final Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement PTO/SB/08  Certified Copy of Priority Document(s)  Response to Missing Parts/Incomplete Application Basic Filing Fee Declaration/POA Response to Missing Parts under 37 CFR 1.53		Drawing(s)  Licensing-related Papers  Petition  Petition to Convert a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  RESPONSE TO OFFICE ACTIO (page 4 from Specification with its content of the content o			
	SIGNATURE	OF APPLICA	NT, ATTORNEY, OR AG	ENT	
Firm or Individual name Signature	Eric S. Hyman, Reg. No. 30,139  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP				
Date	February 17, 2004				
	CEDTIE	CATE OF MAIL	ING/TRANSMISSION		

Alexandria, VA 22313-1450.

Typed or printed name	Linda/D'Elia		
Signature	Kuta IVa	Date	February 17, 2004

## FEE TRANSMITTAL for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$)

0.00

Complete if Known Application Number 09/600,546 Filing Date July 12, 2000 First Named Inventor Claude Chappert Examiner Name Angebranndt, M.J. 1756 15675P322 Art Unit Attorney Docket No.

Date

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None		3. ADDITIONAL FEES		3	KECEIVED			
Deposit Account	Large	Entity	Sma	ill Entity	<u>y</u>		O i	2021
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	- 	F eDescription	EB 24	2004 FeePaid
Account Number 02-2666	1051	130	2051	65	Surcharge - late filing	•		r <del>our</del> au
Deposit	1052	50	2052	25	Surcharge - late provis			
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	2000	130	2053	130	cover sheet.  Non-English specificat	ion		
The Commissioner is authorized to: ( check all that apply)	2063 1812	2,520	1812	2,520	For filing a request for		ation	<del></del>
Charge fee(s) indicated below Credit any overpayments	1804	920 *	1804	920	<ul> <li>Requesting publication Examiner action</li> </ul>	n of SIR prior to		
Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	1805	1,840 *	1805	1,840		n of SIR after		
Charge fee(s) indicated below, except for the filing fee		.,		.,	Examiner action			
to the above-identified deposit account	1251	110	2251	55	Extension for reply will			
FEE CALCULATION	1252	420	2252	210	Extension for reply wit			
1. BASIC FILING FEE	1253	950	2253	475 740	Extension for reply wit Extension for reply wit			
Large Entity Small Entity  Fee Fee Fee Fee Fee Description FeePad	1254 1255	1,480 1,210	2254	605	Extension for reply will			
Code (\$) Code (\$)	1404	330	2401	165	Notice of Appeal			
1001 770 2001 385 Utility filing fee	1402	330	2402	165	Filing a brief in suppor	t of an appeal		
1002 340 2002 170 Design filing fee  1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing	ng		
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a p	ublic use proceedi	ng	
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive - una	woidable		
SUBTOTAL (1) (\$)	1453	1,330	2453	665	Petition to revive - uni	ntentional		
	1501	1,330	2501	665	Utility issue fee (or rei	ssue)		
2. EXTRA CLAIM FEES Extra Fee from Claims below FeePaid	1502 1503	480 640	2502 2503	240 320	Design issue fee Plant issue fee			
Total Claims 15 20 0 x 18.00 = \$0.00	1460	130	2460	130	Petitions to the Comm	nissioner		
Independent 2 3 = 0 x 86.00 = \$0.00	1807	50	1807	50	Prosessing fee under			
Multiple Dependent =	1806	180	1806	180	Submission of Informa	ation Disclosure St	mt	
Large Entity Small Entity	8021	40	8021	40	Recording each paten property (times numb			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)				005				
1202 - 18 2202 - 9 Claims in excess of 20	1809	770	1809	385	Filing a submission aft (37 CFR § 1.129(a))	er ililai rejection		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invexamined (37 CFR § 1			
1203 290 2203 145 Multiple Dependent claim, if not paid	1801	770	2801	385	Request for Continued		:)	
1204 86 2204 43 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited	•	-,	
1205 18 2205 9 **Reissue claims in excess of 20 and over					of a design application			
original patent	Other fe	Other fee (specify)						
SUBTOTAL (2) (\$) 0.00	* Reduce	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)			,	SUBTOTAL (3)	(\$)	
**or number previously paid, if greater, For Reissues, see below	<u> </u>							
SUBMITTED BY	1-4 4*	Ā!-			Comp	lete (if appl		
Name (Print/Type) Eric S. Hyman	Ri (Al	egistratio	nt)	1:	30,139	Telephone	(310) 2	07-3800
Signature						Date	02/	17/04

Signature